FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000040073**1. Corporation Name

WORLDWIDE RESEARCH SERVICES CORPORATION

							(1)	
Principal Place of Business Mailing Address						T (MINIMAL CITÉ DÉSIT MENTE DANS DENTE DESIT DE	OLY BOOK ORINI	10008
26348 US HWY 19 N 26348 US HWY 19 N						•		
CLEARWATER F		CLEARWATER FL 34621						
					-	DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed 05/23/1994		
2. Principal P	lace of Business	2a. Mailing Address				4, FEI Number	Ar	plied For
21		26				59-3248809	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		27				5. Certificate of Status Desired	Fee Re	equired
City & State	e	City & State	City & State			6. Election Campaign Financing .	\$5.00	
23		28				Trust Fund Contribution	Added (to Fees
Zip	Country	Zip	Country	,		8. This corporation owes the current year Inta	ingible □Yes	□No
24	25	29 30	1		i	Personal Property Tax. 10. Name and Address of New Registered A		LINO
	9. Name and Address of Curre	nt Registered Agent	81	Name		10. Name and Address of New Registered	.gent	
DAUG	GHERTY, GERALD E		L.			,		. <u>-</u>
26348 US HWY 19 N			82	Street	Address	s (P.O. Box Number is Not Acceptable)		'
	ARWATER FL 34621		83	-				———
			84	City		FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: Rec	jistered Ager	nt signature r	required wh	nen reinstating) DATE		
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	P	☐ DELETÉ	1.1 TITLE		Ì		Change	☐ Addition
NAME	Daugherty, Gerald e		1.2 NAME					
STREET ADDRESS	2707 HAVERHILL CT		1.3 STREE	TADDRESS				
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY-S	T-ZIP				
TITLE	S	☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME	DAUGHERTY, LINDA D		2.2 NAME					
STREET ADDRESS	2707 HAVERHILL CT.		2.3 STREE	TADDRESS				
CITY-ST-ZIP	CLEARWATER FL	C pereze	2.4 CITY-5	ST-ZIP	<u> </u>		Change	
TITLE		☐ DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAME	- +DBP	ł			}
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		☐ DELETE	3.4. CITY-5 4.1 TITLE	si-ZIP	 		Change	Addition
TITLE		ب مدداد	4.1 IIILE 4.2 NAME					
NAME				T ADDRESS				ļ
STREET ADDRESS								ŀ
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-S 5.1 TITLE	1-2IF			☐ Change	Addition
NAME			5.2 NAME		1	•		
STREET ADDRESS				TADDRESS		•		-
CITY-ST-ZIP		ļ	5.4 CITY-S					
TITLE		☐ DELETE	6.1 TITLE		1		☐ Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS		i	6.3 STREE	T ADDRESS	1			* {
CITY-ST-ZIP			6.4 CITY-S	T-ZIP				-

14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes: I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90244 036 ***150.00